

Partners in Bio-Terrorism Surveillance/List of Public Health Information Sources:

Sentinels, Guardians, Aces, Guides, and Allies

Sentinels: 76-100 reporting sites

Sentinel surveillance sites are strategically located to ensure appropriate representation across the state as determined by population, key assets and geographic location and may consist of, but are not limited to, hospitals, Federally Qualified Health Centers, Rural Health Clinics, physician practices, schools, large employers, and animal confinement operations.

These Sentinels provide daily syndromic data to the Bio-Terrorism Surveillance Team in Jefferson City, either by e-mailing or faxing in the Form 1 or by using the web-based system to enter the data themselves.

Hospitals selected to participate in the Hospital Electronic Surveillance System (HESS) will be submitting their BTS data electronically, through that automated system. The HESS pilot begins 1 April, 2004 and the implementation begins 1 July 2004.

HESS will enable a more timely and useful response to public health threats through 'real time' capabilities which will allow us to receive data and identify potentially harmful trends and aberrations at once rather than days or even weeks after the incidents.

Guardians: Local Public Health Agencies & Bio-Terrorism Epidemiology Specialists

Contractual requirements state that Local Public Health Agencies and their Bio-Terrorism Epidemiology Specialists will conduct active surveillance on a local level; select reporters are contacted at regular intervals and asked about the occurrence of the diseases or syndromes under surveillance for purposes of assessing the occurrence of disease in a community/geographic area. The number and types of active surveillance sites are determined by each Local Public Health Agency on an individual basis, by assessing their population, key assets and strategic significance.

The LPHAs and BT epidemiologists review their local active surveillance system each week. Using what they know of their community, it's events, other relevant local information such as absenteeism, local events, weather and mold/pollen counts to determine potential causes, rule out bio-terrorism, help identify potential contributors and assist in determining the scope of the public health threat.

Aces: Pharmacists, veterinarians, coroners, physicians, etc.

The professionals who only report (via e-mail or phone calls and web site entries once it is available) unusual incidents they have noticed in their practice, which have the possibility of being a public health threat or related to one. This could be one case of anthrax or an unusually high number of cases of gastroenteritis in a normally healthy population.

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Guides: FBI, DIA, Military Bases, CERT, and CDC

Organizations providing intelligence, guidance and information that help determine areas to focus surveillance efforts, increase vital links in communication and reveal areas of public health concern.

Allies: Department of Natural Resources, Geographic Information Systems, Department of Agriculture, Communicable Disease, Environmental Health, Other States

Other Offices, Departments and Agencies with collaborative relationships with the Office of Surveillance that help ensure the Bio-Terrorism Surveillance Team carry out their mission.

This includes the sharing of data collected by these allies such as the diseases and conditions reportable in Missouri that are reported across the state via CD-1s, the location of chemical spills reported to the DNR and the number of people potentially at risk for a specific region or population.